



## Learning Objectives

- Background of Need for SPA
- Understand what a State Plan Amendment (SPA) is
- Understand what a Tribal Medicaid Federally Qualified Health Center (FQHC) designation is.
- Provide an overview of Arizona's Tribal Federally Qualified Health Centers (FQHCs) SPA
- Provide a synopsis of other State Tribal FQHC SPAs
- Discuss next steps







### What is a State Plan Amendment (SPA)?

- Each state has a Medicaid state plan that details how the state will administer its Medicaid program.
- States must follow broad federal rules in order to receive federal matching funds, but have flexibility to design their own version of Medicaid within the federal statute's basic framework
- In order to amend a state plan, states must submit State
   Plan Amendments (SPAs), and receive approval from CMS.



### What is a 638 FQHC?

- Federally Qualified Health Center (FQHC) program is intended to increase the provision of primary care services in underserved communities.
- FQHC services must include preventive and primary health care services such as family and internal medicine, pediatrics, obstetrics and gynecology, diagnostic laboratory and radiology services, emergency services, preventive dental services, and pharmacy services (in certain centers)
- Effective April 1, 2018, AHCCCS established a new provider type that allowed Tribal 638 Clinics to elect to be designated as a 638 Federally Qualified Health Center (FQHC)
- IHS clinics are <u>NOT</u> eligible to become a 638 to become a 638 FQHC.







### Arizona SPA (18-004)

Submitted on: March 12, 2018

Effective date: April 1, 2018

 This SPA establishes an Alternative Payment Methodology (APM) for Tribal 638 that elect to be paid as a Tribal Federally Qualified Health Center (Tribal FQHC).

The APM is equivalent to the All-Inclusive-Rate (AIR)

 The published rate is paid for up to 5 encounters/visits per recipient per day, for separate distinct visits.





### AZ SPA continued

- The 638 FQHC would not be required to report its costs for the purposes of establishing a PPS rate.
- Currently, there are 2 Tribes who have the Tribal FQHC designation
- 39 Tribal-638 sites are FQHC eligible





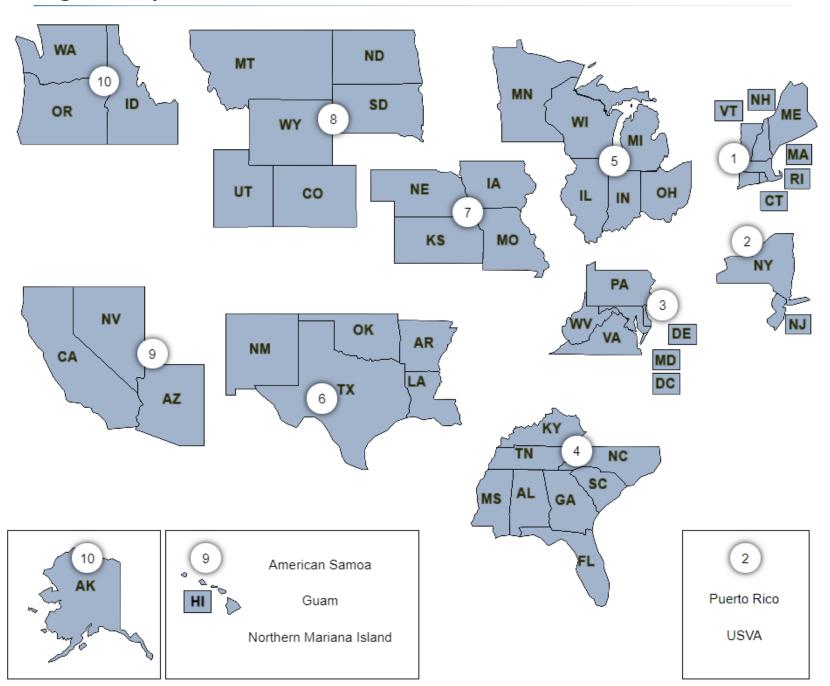
### **Arizona Executed Care Coordination Agreements**

- Per the AHCCCS Tribal Consultation held on August 12, 2021, currently there are 4 CCAs in place:
  - Tuba City and Northern AZ Healthcare/Flagstaff Medical Center
  - Tohono O'odham (Sells Hospital) and Tucson Medical Center
  - Gila River (Hu Hu Kam Hospital) and Phoenix Children's Hospital
  - Gila River Health Care and Valleywise Health





#### Regional Map





#### Connecticut

- Payment Methodology: Alternative Payment Methodology= All-Inclusive Rate
- # encounters: 3 encounters per day per beneficiary
- Reimbursable facility: Tribal 638
- Reimbursable services: medical, behavioral health, & dental
- Cost reporting requirement: No

### **Region 3**

#### Virginia

No mention of Tribes in this SPA





#### Michigan

- Payment Methodology: APM
- # encounters: 3 encounters per day per beneficiary
- Reimbursable facility: Tribal 638
- Reimbursable services: medical, behavioral health, & dental
- Cost reporting requirement: -





#### Oklahoma

- Payment Methodology: APM
- # encounters: 3 encounters per day per beneficiary
- Reimbursable facility: Indian Health Services, Tribal 638, Urban Indian Health Programs
- Reimbursable services: medical, behavioral health, & dental
- Cost reporting requirement: -

#### New Mexico

- Payment Methodology: APM
- # encounters: -
- Reimbursable facility: Tribal 638, Indian Health Services & Indian Health Care Provider
- Reimbursable services: -

ONA ACost reporting requirement: -



#### Kansas

- Payment Methodology: APM
- # encounters: 3 encounters per day per beneficiary
- Reimbursable facility: Indian Health Services & Tribal 638
- Reimbursable services: medical, behavioral health, & dental
- Cost reporting requirement: No





#### Montana

- Payment Methodology: APM
- # encounters: Tribal FQHC's may bill the appropriate number of payable daily encounters based on the services that members receive.
- Reimbursable facility: Tribal 638
- Reimbursable services: Reimbursement will be allowed for the same categories of service as included within the state plan that tribal facilities provide.
- Cost reporting requirement: -

#### North Dakota

- Payment Methodology: APM
- # encounters: multiple visits for different services on the same day with different diagnosis
- Reimbursable facility: Indian Health Services and Tribal 638
- Reimbursable services: general covered services
- Cost reporting requirement: No

#### Wyoming

- Payment Methodology: APM
- # encounters: A Tribal FQHC may bill
   Wyoming Medicaid for services on a per visit basis whether those Reimbursable facility: Indian Health Services & Tribal 638
- Reimbursable services: Services are furnished at the facility, outside the facility, by telehealth (when the practitioner is in the facility and client is off-site) or provided by off-site providers under contract to the Tribal FQHC.
- Cost reporting requirement: No



#### Arizona

- Payment Methodology: Alternative Payment
   Methodology (APM)=AIR
- # encounters: 5 encounters per day per beneficiary
- Reimbursable facility: Tribal 638
- Reimbursable services: Includes covered telemedicine services
- Cost reporting requirement: No

#### <u>Nevada</u>

- Payment Methodology: APM
- # encounters: 5 encounters per day per beneficiary
- Reimbursable facility: Indian Health Services
   & Tribal 638
- Reimbursable services: face to face encountered that are limited to healthcare professionals as approved under state plan

#### California

- Payment Methodology: APM
- # encounters: 3 encounters per day per beneficiary
- Reimbursable facility: Tribal 638
- Reimbursable services: medical, dental, behavioral health, & ambulatory services
- Cost reporting requirement: No



#### Idaho

- Payment Methodology: APM
- # encounters: A Tribal FQHC may bill Idaho Medicaid for covered services on a per-visit basis whether those services are furnished at the facility, outside the facility, or provided by off-site providers under contract to the Tribal FQHC
- Reimbursable facility: Indian Health Services & Tribal 638
- Reimbursable services: Covered services under state plan and the same services that are currently reimbursable as an IHS/Tribal facility.
- Cost reporting requirement: -

#### Washington

- Payment Methodology: APM
- # encounters: 5 encounters per day per beneficiary
- Reimbursable facility: Indian Health Services & Tribal 638
- Reimbursable services: professional services
- Cost reporting requirement: No



### **Highlights**

- 14 States have approved Tribal FQHC SPAs
- 12 states have not submitted an FQHC SPA
- 8 State have a No cost reporting requirement
- # States have 3 encounters limitation
- # States have 5 encounters limitation
- # State include I/T/Us as reimbursable facilities





### **Discussion Questions**

- What unique details did you see in other SPAs in other states?
- Are there details of other SPAs that we should consider in Arizona?



# Thank you!

## **Resources:**

- https://www.azahcccs.gov/Resources/Downloads/MedicaidStatePlan/Amendments/2018/20180522AZSPA18-004ApvPkg.pdf
- https://www.azahcccs.gov/Resources/Downloads/DFMSTraining/2021/2021\_Tribal\_638\_FQHC.pdf
- https://www.azahcccs.gov/PlansProviders/Downloads/IHS-TribalManual/IHS-Chapter20\_638\_FQHC.pdf
- https://www.macpac.gov/wp-content/uploads/2017/12/Medicaid-Payment-Policy-for-Federally-Qualified-Health-Centers.pdf

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